

7-21-08 10/580944 COPE

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	Patent#: 7,322,779	
	Filing Date	Issued: January 29, 2008	
	First Named Inventor	Dieter Kress	
	Art Unit	N/A	
	Examiner Name	Not Yet Assigned	
Total Number of Pages in This Submission	7	Attorney Docket Number	2693-000017/US/NP

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below):  Certificate of Express Mailing Label No. EM 184 988 283 US (7/18/2008), Request for Certificate of Correction Pursuant to 37 CFR 1.322; Certificate of Correction; Copies of filed application documents; Return Receipt Postcard
<div>Remarks</div> <div>Certificate JUL 23 2008 of Correction</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	HARNESSE, DICKEY & PIERCE, P.L.C.		
Signature			
Printed Name	Stephen T. Olson		
Date	July 18, 2008	Reg. No.	36,626

EM 184 988 283 US

Express Mail Label No. EM 184 988 283 US (7/18/2008)	Dated: July 18, 2008	Reg. No. 36,626
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JUL 23 2008  
STO/dl



Docket No.: 2693-000017/US/NP  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Letters Patent of:  
Dieter KRESS et al.

Patent No.: 7,322,779

Issued: January 29, 2008

For: INTERFACE BETWEEN TWO PARTS OF A  
TOOL SYSTEM

**REQUEST FOR CERTIFICATE OF CORRECTION  
PURSUANT TO 37 CFR 1.322**

Attention: Certificate of Correction Branch  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Upon reviewing the above-identified patent, Patentee noted a typographical error which should be corrected.

When the application was filed, the Assignee was indicated on the Application Data Sheet and on the Assignment Recordation Cover Sheet as: Mapal Fabrik für Präzisionswerkzeuge Dr. Kress KG. Please make the correction accordingly.

The error was not in the application as filed by applicant; accordingly no fee is required.

Transmitted herewith is a proposed Certificate of Correction effecting such amendment. Patentee respectfully solicits the granting of the requested Certificate of Correction.

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Patent Publication

JUL 23 2008

Patent No.: 7,322,779

Docket No.: 2693-000017/US/NP

Applicant believes no fee is due with this request. However, if a fee is due, please charge our Deposit Account No. 08-0750, under Order No. 2693-000017/US/NP from which the undersigned is authorized to draw.

Dated: July 18, 2008

Respectfully submitted,

By 

Stephen T. Olson

Registration No.: 36,626

HARNESS, DICKEY & PIERCE, P.L.C.

P.O. Box 828

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(248) 641-1600

Attorney for Applicant

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**UNITED STATES PATENT AND TRADEMARK OFFICE  
CERTIFICATE OF CORRECTION**

Page 1 of 1

PATENT NO. : 7,322,779  
APPLICATION NO. : 10/560,944  
ISSUE DATE : January 29, 2008  
INVENTOR(S) : Dieter KRESS et al.

It is certified that an error appears or errors appear in the above-identified patent and that said Letters Patent is hereby corrected as shown below:

In item (73) on the cover sheet of the Patent, the name of the Assignee should be corrected from **"MAPAL Fabrik fur Prazisionswerkzeuge"** to:  
**--MAPAL Fabrik für Präzisionswerkzeuge Dr. Kress KG--**

MAILING ADDRESS OF SENDER (Please do not use customer number below):

Stephen T. Olson  
HARNESS, DICKEY & PIERCE, P.L.C.  
P.O. Box 828  
Bloomfield Hills, Michigan 48303

1

**JUL 23 2008**



## **Application Data Sheet**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	INTERFACE BETWEEN TWO PARTS OF A TOOL SYSTEM
Attorney Docket Number::	2693-000017/US/NP
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	5
Figure for Publication::	Fig. 2
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Germany
Status::	Full Capacity
Given Name::	Dieter
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Country of Residence::	Germany
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Country of mailing address::	Germany
Postal or Zip Code of mailing address::	D-73431

Inventor

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**Patent Publication**

**JUL 23 2008**

Applicant Authority Type::  
 Primary Citizenship Country:: Germany  
 Status:: Full Capacity  
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### Correspondence Information

Correspondence Customer Number:: 27572

### Representative Information

Stephen T. Olson:: 36,626

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/EP2004/005844	05/29/04

### Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
Germany	103 26 928.2	06/16/03	Yes

### Assignee Information

Assignee name:: Mapal Fabrik für Präzisionswerkzeuge  
 Dr. Kress KG  
 Street of mailing address:: Obere Bahnstrasse 13  
 City of mailing address:: Aalen  
 Country of mailing address:: Germany  
 Postal or Zip Code of mailing address:: 73431

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## RECORDATION FORM COVER SHEET PATENTS ONLY

To the Director of the U.S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

### 1. Name of conveying party(ies):

Dieter Kress (12/13/2005) and Friedrich Häberle  
(12/13/2005)

Additional name(s) of conveying party(ies) attached? ☐ Yes ☒ No

### 3. Nature of conveyance/Execution Date(s):

Execution Date(s): in parentheses after inventor name

- ☒ Assignment ☐ Merger ☐ Change of Name  
☐ Security Agreement ☐ Joint Research Agreement  
☐ Government Interest Assignment  
☐ Executive Order 9424, Confirmatory License  
☐ Other \_\_\_\_\_

### 2. Name and address of receiving party(ies)

Name: Mapal Fabrik für Präzisionswerkzeuge Dr. Kress KG

Internal Address: \_\_\_\_\_

Street Address: \_\_\_\_\_

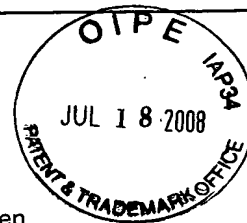
Obere Bahnstrasse 13

City: Aalen

State: \_\_\_\_\_

Country: Germany Zip: 73431

Additional name(s) & address(es) attached? ☐ Yes ☒ No



### 4. Application or patent number(s):

A. Patent Application No.(s)

☒ This document is being filed together with a new application.

B. Patent No.(s)

Additional numbers attached?

☐ Yes ☒ No

### 5. Name and address to whom correspondence concerning document should be mailed:

Name: Stephen T. Olson  
HARNESS, DICKEY & PIERCE, P.L.C.

Internal Address: Atty. Dkt.: 2693-000017/US/NP

Street Address: P.O. Box 828

City: Bloomfield Hills

State: MI Zip: 48303

Phone Number: (248) 641-1600

Fax Number: (248) 641-0270

Email Address: \_\_\_\_\_

### 6. Total number of applications and patents involved:

1

### 7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40.00

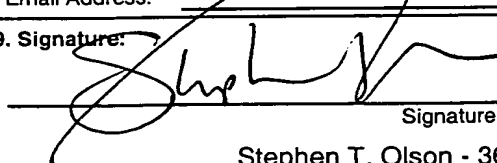
- ☐ Authorized to be charged by credit card  
☐ Authorized to be charged to deposit account  
☒ Enclosed  
☐ None required (government interest not affecting title)

### 8. Payment Information

a. Credit Card Last 4 Numbers \_\_\_\_\_  
Expiration Date \_\_\_\_\_

b. Deposit Account Number \_\_\_\_\_  
Authorized User Name \_\_\_\_\_

### 9. Signature:

  
Signature

December 15, 2005

Date

Stephen T. Olson - 36,626

Name of Person Signing

Total number of pages including cover sheet, attachments, and documents:

3

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